CLAIMS ONLY

Application Number	Filing Date
10/680618	

Applicant(s)

01-11-05

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11			1			
12						
13				1		
14				1		
15				1		
16				1		
17				1		
18				1		
19				1		
20				1		
21			1			
22				1		
23				1		
24				1		
25				1		
26				1		
27				1		
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30				1		
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42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep			3			
Total Depend			17			
Total Claims			20			

CLAIMS	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						